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CONFIRMATION NO. 1775

Bib Data Sheet

SERIAL NUMBER 09/938,698	FILING OR 371(c) DATE 08/23/2001 RULE	CLASS 313	GROUP ART UNIT 2879	ATTORNEY DOCKET NO. 96790P375	
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** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** JAPAN 252315/2000 08/23/2000					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/26/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY JAPAN	SHEETS DRAWING 2	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 1
ADDRESS 08791					
TITLE VACUUM FLUORESCENT DISPLAY HAVING X-RAY SHIELDING CAP					
FILING FEE RECEIVED 882	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		